

**Work Order ID 125596****\*125596\***

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Thursday, October 16, 2014 8:43:17 AM

Item ID:	D3574-1	Accept	<b>*N900040100*</b>	Setup	Start	<b>*NS1*</b>		
Revision ID:						Stop	<b>*NS2*</b>	
Item Name:	Cabin Floor Protector							
Start Date:	10/16/14	Start Qty:	2.00	<b>*2*</b>	Cust Item ID:			
Required Date:	10/17/14	Req'd Qty:	2.00	<b>*2*</b>	Customer:			
Reference:								
Approvals:	Process Plan: <i>M</i>	Date: 14-10-16	Tooling:	Date:		Run	Start	<b>*NR1*</b>
	QC: _____	Date: _____	SPC (Y/N): _____	Date: _____		Stop		<b>*NR2*</b>

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3574	Rev B								
100 <b>*100*</b> Waterjet	FLOW WATER JET	0.00							<i>(2)</i> <i>14/10/14</i>
FLOW CNC Waterjet	<b>Memo</b> 1-Cut as per Dwg D3574 Dwg Rev: <i>B</i> Prog Rev: <i>B</i>	0.00							
	2- Deburr								
110 <b>*110*</b> QC	QC2- Inspect parts off machine FAI/FAIB	0.00							<i>(3)</i> <i>14/10/14</i>
Quality Control	<b>Memo</b>	0.00							

DQA: \_\_\_\_\_

Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering Quality Other <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

Landing Gear	General							
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced				
<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up				
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure				
<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld				
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled				
<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other				
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread						
<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set						
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration						
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence						

**Work Order ID 125596**

Thursday, October 16, 2014 8:43:18 AM

**\*125596\***

Page 2

Item ID: D3574-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Cabin Floor Protector

Stop

**\*NS2\***

Start Date: 10/16/14 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 10/17/14 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 <b>*120*</b> QC	QC8- Inspect parts - second check	0.00							DAS 38 9-89
Quality Control	Memo	0.00							OCT 23 2014
130 <b>*130*</b> Small Fab	Small Fab Memo Deburr if necessary.	0.00							
Small Fab									
140 <b>*140*</b> QC	QC5- Inspect part completeness to step on W/O Memo	0.00							
Quality Control									

N/A

N/A

DQA: \_\_\_\_\_

Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

Work Order: _____	<b>DISPOSITION</b>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No. _____							

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b>	<b>General</b>			
Bending	Bend			
Centre Not Concentric	BOM/Route			
Cracks	Broken/Damage/Defect			
Crimp/Kink/Ripple/Wave	Burrs			
Cuffs	Contamination			
Crushing	Countersink			
Heat Treat	Cut Too Short			
Inspection Strip in Tube	Drawing			
Marks/Chatter	Drill Holes			
Turning Sequence	Finish			
Wave/Twist in Tube	Fit/Function			

**Work Order ID 125596****\*125596\***

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Thursday, October 16, 2014 8:43:18 AM

Item ID: D3574-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Cabin Floor Protector

Start Date: 10/16/14 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 10/17/14 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

150

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

lk

**\*150\***

Packaging

Packaging

160

QC21- Final Inspection - Work Order Release

0.00

**\*160\***

QC

Quality Control

Memo

0.00

OCT 31 2014

DAS

BB

BB

14/11/3 JJ

RJU-10-31

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only 

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Thermoforming <input type="checkbox"/> Finishing <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <hr/> <input type="checkbox"/> Other

**Picklist Print**

Thursday, October 16, 2014 8:43:21 AM

Page 1

Work Order ID: 125596

**\*125596\***

Parent Item: D3574-1

**\*D3574-1\***

Parent Item Name: Cabin Floor Protector

Start Date: 10/16/14

Required Date: 10/17/14

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP Rev :A New Issue 07-01-22 EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04		Purchased	No				sf	5,896.686		51		**	

**\*MI FXS 125-F60029-04\***

GE PLASTICS LEXAN SHEET

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	MAT019	1590.095	
	124866	106	
	m126425	160.925	
	m127934	665	
	m128746	658.17	46.666
SABIC		2560	
	m130209	2560	
TPI		1746.59178	
	m129759	1746.59178	

Oct 14/10/18

DQA: \_\_\_\_\_

Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>  Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>  Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>  Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

<b>FAULT CATEGORY</b>									
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other					

DART AEROSPACE LTD	Work Order:	125596
Description: Cabin Floor Protector	Part Number:	D3574-1
Inspection Dwg: D3574 Rev: B		Page 1 of 2

### FIRST ARTICLE INSPECTION CHECKLIST

First Article     Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø3.00	+0.006/-0.001	3.00	/		V-JKM-01	
7.37	+/-0.030	7.37	/		T-JKM-06	
10.75	+/-0.030	10.75	/			
11.00	+/-0.030	11.00				
15.25	+/-0.030	15.25	/			
25.87	+/-0.030	25.87	/			
39.75	+/-0.030	39.75	/			
44.75	+/-0.030	44.75	/			
49.11	+/-0.030	49.11	/			
51.11	+/-0.030	51.11	/			
53.51	+/-0.030	53.51	/			
63.50	+/-0.030	63.50	/			
65.25	+/-0.030	65.25	/			
10.75	+/-0.030	10.75	/			
11.06	+/-0.030	11.06	/			
14.75	+/-0.030	14.75	/			
25.50	+/-0.030	25.50	/			
25.75	+/-0.030	25.75	/			
26.00	+/-0.030	26.00	/			
32.87	+/-0.030	32.87	/			
38.81	+/-0.030	38.81	/			
44.75	+/-0.030	44.75	/			
45.00	+/-0.030	45.00	/			
48.25	+/-0.030	48.25	/			
58.38	+/-0.030	58.38	/			
61.25	+/-0.030	61.25	/			
64.13	+/-0.030	64.13	/			
64.63	+/-0.030	64.63	/			
66.50	+/-0.030	66.50	/			
7.50	+/-0.030	7.50	/			
9.50	+/-0.030	9.50	/			
10.38	+/-0.030	10.38	/			
10.88	+/-0.030	10.88	/			
14.50	+/-0.030	14.50	/			

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering Quality Other <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	Folio/Program Grain Hardware Inspection Incomplete/Unqualified Instructions Incomplete/Unclear Misaligned/off center Mislabeled Misread Off-set Out of Calibration Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

DART AEROSPACE LTD	Work Order:	
Description: Cabin Floor Protector	Part Number:	D3574-1
Inspection Dwg: D3574 Rev: B		Page 2 of 2

### FIRST ARTICLE INSPECTION CHECKLIST

First Article     Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
16.56	+/-0.030	16.56	-		V-JKM-01	
18.75	+/-0.030	18.75	/		T-JKM-06	
24.13	+/-0.030	24.13	-			
26.50	+/-0.030	26.50	-			
30.50	+/-0.030	30.50	/			
33.88	+/-0.030	33.88	-			
39.50	+/-0.030	39.50	-			
40.25	+/-0.030	40.25	-			
43.50	+/-0.030	43.50	-			
43.83	+/-0.030	43.83	-			
46.60	+/-0.030	46.60	/			
7.63	+/-0.030	7.63	-			
11.00	+/-0.030	11.00	/			
11.50	+/-0.030	11.50	-			
16.75	+/-0.030	16.75	-			
19.00	+/-0.030	19.00	-			
22.50	+/-0.030	22.50	-			
30.75	+/-0.030	30.75	-			
32.63	+/-0.030	32.63	-			
32.75	+/-0.030	32.75	-			
35.13	+/-0.030	35.13	-			
36.50	+/-0.030	36.50	-			
40.00	+/-0.030	40.00	/			
41.88	+/-0.030	41.88	-			
43.63	+/-0.030	43.63	/			
0.125	+/-0.010	.125	DAS			

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Measured by:	DR	Audited by:	9-89	Prototype Approval:	N/A
Date:	14/10/14	Date:	OCT 23 2014	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	08.02.28	New Issue	KJ//DD	
B	08.07.31	47.75 dimension removed	KJ/DD	
C	09.05.15	Dimensions updated per Dwg Rev B	KJ	M

DQA: \_\_\_\_\_

Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Thermoforming <input type="checkbox"/> Finishing <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

<b>FAULT CATEGORY</b>									
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other					

